U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

	For Official Use Only
	S Recod
	(S Rec 5 705)
E	(ME 12 CE ST
	OIMS

3. Name and address of person filing.

P.O. Box, Bidg., Room No., if any SUITE 300

CANGELOSI

1. File Number U -

Name VINCENT

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

Name HIGHWAY LOCAL MOTOR, TRAMSTERS LOCAL 707

4. Name, file number, and address of labor organization.

P.O. Box, Building and Room Number, if any STITE 300

Labor Organization File Number 033-570

Street	14	FRONT	STREET				Stree	a]	14 FRONT STR	EKT		
City	HEMP	STEAD					City	F	iempstead			
State	New	York			ZIP Code + 4	11550-3602	State	1	New York		ZIP Code + 4	11550-3602
5. Positi	ion in la	ibor orga	nization.	SECRETAL	RY/TREASU	RER						
Ent	er appn	opriate d	lata below if	, during the		ear, you or your spo specified in the exclu					the following in	terests
A. Held	an int ary valu	erest in Je from	, engaged an emplo	in transact	ions (includi e employee	ing loans) with, or s your organizati	derived i	ncc	ome or other eco	nomic benefit of seeking to repres	sent.	
6. Name	e and a	ddress o	f Employer ((including tr	ade name, if a	апу).	7.a. Na	ture	e of Interest, Trans	action, or Income.		
Name												
Trade	Name,	if any:					:					
P.O. B	lox, Bid	g., Roon	n No., if any	•							····	
Street							7.b. Am	10 UI	nt.			
City												
State					ZIP Code + 4							
						Sign	ature					
subm	itted in	this repo	et (including	the informa	stion containe	es, under penalty of d in any accompany implete. (See the se	ing docum	nen	its), has been exer	nined by the signate	hat all of the info ory and is, to the	ormation best of the
Sign	V be		~-0	anges	٧_ ٠		On	8	10-11-01	516-560-85	03	
	-				<u>, </u>				Date	Te	lephone Numbe	r
Form LM	-30 (20	03)										Page 1 of 2

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: Name Road Carriers Local 707 welfare fund a. Labor Organization Trade Name, if any: X b. Trust P.O. Box, Bldg., Room No., if any Suite 301 c. Employer Street 14 Front Street City Hempstead ZIP Code + 4 11550-3602 State New York 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. Union is the Collective Bargaining Agent for the Name Road Carriers Local 707 Welfare Fund participants in the Welfare Fund. Vincent Cangelosi is a Trustee on the Welfare Fund. Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 301 Street 14 Front Street 11.b. Approximate dollar value of such dealing. \$0 City Hempstead 12.a. Nature of interest held or income received. Reimbursementfor attendance at one out of town Fund State New York ZIP Code + 4 11550-3602 meeting and two Educational Conferences. Reimbursed expenses include registration fees, airfare, Hotel, rental car, parking, meals & Taxi.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer (including trade name, if any).	or Labor Relations Consultant	14.a. Nature of payment.	
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State	ZIP Code + 4		
13.b. is the Business an Employer	or Consultant ?	14.b. Amount of payment.	

12.b. Amount.

\$2,937

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a

substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 9. Business deals with: 8. Name and address of Business (including trade name, if any). Name Road Carriers Local 707 Pension Fund a. Labor Organization Trade Name, if any: X b. Trust P.O. Box, Bidg., Room No., if any Suite 301 c. Employer Street 14 Front Street Hempstead State New York ZIP Code + 4 11550-3602 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. Union is the Collective Bargaining Agent for the Name Road Carriers Local 707 Pension Fund participants in the Pension Fund. Vincent Cangelosi is a Trustee on the Pension Fund. Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 301 Street 14 Front Street 11.b. Approximate dollar value of such dealing. \$0 City Hempstead 12.a. Nature of interest held or income received. Reimbursementfor attendance at one out of town Fund ZIP Code + 4 11550-3602 State New York meeting and two Educational Conferences. Reimbursed expenses include registration fees, airfare, Hotel, rental car, parking, meals & Taxi.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or (including trade name, if any).	Labor Relations Consultant	14.a. Nature of payment.		
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City				
State	ZIP Code + 4			
13.b. Is the Business an Employer	or Consultant ?	14.b. Amount of payment.		

12.b. Amount.

\$2,937

Name of Person Filing Vincent Cangelosi	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actively part of which consists of buying from or selling or leasing directly or included the dealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise		
8. Name and address of Business (including trade name, if any). Name ING Capital Management	9. Business deals with:		
Trade Name, if any: P.O. Box, Bidg., Room No., if any	a. Labor Organization X b. Trust		
Street 230 Park Avenue City New York	c, Employer		
State New York ZIP Code + 4 10169			
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Road Carriers Local 707 Pension Fund	11.a. Nature of such dealing. Union is the Collective Bargaining Agent for the participants in the Pension Fund. Vincent Cangelosi is a Trustee on the Pension Fund. Employer is an		
Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 301	Investment Manager hired by the Pension Fund. The Pension fund pays the Investment Manager a fee.		
Street 14 Front Street	11.b. Approximate dollar value of such dealing. \$15,000		
City Hempstead State New York ZIP Code + 4 11550-3602	12.a. Nature of interest held or income received. Dinner meetings hosted by several Investment Managers on or about 4-15-04, 11-30-04.		
	12.b. Amount. \$70		
C. Received from any employer (other than an employer covered undo or from any labor relations consultant to an employer any payment of money			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			

14.b. Amount of payment.

13.b. Is the Business an Employer

ZIP Code + 4

or Consultant

?

State

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

9. Business deals with:

Name Oak Associates

Trade Name, if any:

X b. Trust

P.O. Box, Bldg., Room No., if any

City Akron

Street 3875 Embassy Parkway

State Ohio

ZIP Code + 4 44333

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Road Carriers Local 707 Pension Fund

Trade Name, if any:

P.O. Box, Bidg., Room No., if any Suite 301

Street 14 Front Street

City Hempstead

State New York

ZIP Code + 4 11550-3602

c. Employer

11.a. Nature of such dealing.

Union is the Collective Bargaining Agent for the participants in the Pension Fund. Vincent Cangelosi is a Trustee on the Pension Fund. Employer is an Investment Manager hired by the Pension Fund. The Pension fund pays the Investment Manager a fee.

11.b. Approximate dollar value of such dealing.

\$69,000

12.a. Nature of interest held or income received.

Dinner meeting hosted by several Investment Managers on or about 11-30-04.

12.b. Amount.

\$30

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

13.b. Is the Business an Employer

or Consultant

?

ZIP Code + 4

14.b. Amount of payment.

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Makay Shields

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 9 W. 57th Street

City New York

State New York

ZiP Code + 4 10019

9. Business deals with:

a. Labor Organization

X b. Trust

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Road Carriers Local 707 Pension Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 301

Street 14 Front Street

City Hempstead

State New York

ZIP Code + 4 11550-3602

11.a. Nature of such dealing.

Union is the Collective Bargaining Agent for the participants in the Pension Fund. Vincent Cangelosi is a Trustee on the Pension Fund. Employer is an Investment Manager not doing any business with the Union or Funds.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Dinner meeting hosted by several Investment Managers on or about 12-1-04.

12.b. Amount.

\$60

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

13.b. Is the Business an Employer

ZIP Code + 4

or Consultant

?

14.a. Nature of payment.

14.b. Amount of payment.

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business

of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: Name Oppenheimer Capital a. Labor Organization Trade Name, if any: X b. Trust P.O. Box, Bldg., Room No., if any c. Employer Street 1345 Avenue of the Americas New York State New York ZIP Code + 4 10105 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. Union is the Collective Bargaining Agent for the Name Road Carriers Local 707 Pension Fund participants in the Pension Fund. Vincent Cangelosi is a Trustee on the Pension Fund. Employer is an Investment Manager hired by the Pension Fund. The Trade Name, if any: Pension fund pays the Investment Manager a fee. P.O. Box, Bldg., Room No., if any Suite 301 Street 14 Front Street 11.b. Approximate dollar value of such dealing. \$96,000 City Hempstead 12.a. Nature of interest held or income received. Dinner meetings hosted by several Investment ZIP Code + 4 11550~3602 State New York Managers on or about 2-23-04,2-24-04 4-15-04, 11-30-04. 12.b. Amount. \$325

C. Received from any employer (of or from any labor relations consultant to				
Name and address of Employer or Labor Relations Consultant (including trade name, if any).			14.a. Nature of payment.	
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City		:		
State	ZIP Code + 4	:		
13.b. Is the Business an Employer	or Consultant ?		14.b. Amount of payment.	

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Rothchild Asset Management

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1251 Avenue of the Americas

City New York

State New York

ZIP Code + 4 10020

9. Business deals with:

a. Labor Organization

X b. Trust

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Road Carriers Local 707 Pension Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 301

Street 14 Front Street

City Hempstead

State New York

ZIP Code + 4 11550-3602

11.a. Nature of such dealing.

Union is the Collective Bargaining Agent for the participants in the Pension Fund. Vincent Cangelosi is a Trustee on the Pension Fund. Employer is an Investment Manager hired by the Pension Fund. The Pension fund pays the Investment Manager a fee.

11.b. Approximate dollar value of such dealing.

\$7,000

12.a. Nature of interest held or income received.

Dinner meetings hosted by several Investment Managers on or about 12-1-04 2-22-04,2-23-04 and 4-15-04

12.b. Amount.

\$165

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

ŀ

14.a. Nature of payment.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

13.b. Is the Business an Employer

or Consultant

?

14.b. Amount of payment.

Name of Person Filing Vincent Cangelosi	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary vas substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or including with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise		
8. Name and address of Business (including trade name, if any). Name Boyd Waterson Trade Name, if any: P.O. Box, Bidg., Room No., if any Suite 1400 Street 1801 Bast 9th Street	9. Business deals with: a. Labor Organization X b. Trust c. Employer		
City Cleveland			
State Ohio ZIP Code + 4 44114			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name Road Carriers Local 707 Welfare Fund Trade Name, if any:	Union is the Collective Bargaining Agent for the participants in the Welfare Fund. Vincent Cangelosi is a Trustee on the Welfare Fund. Employer is an Investment Manager hired by the Welfare Fund. The		
P.O. Box, Bldg., Room No., if any Suite 301	Welfare fund pays the Investment Manager a fee.		
Street 14 Front Street	11.b. Approximate dollar value of such dealing. \$76,000		
City Hempstead	12.a. Nature of interest held or income received.		
State New York ZIP Code + 4 11550-3602	Dinner meetings hosted along with several Investment managers on or about Feb. 22nd & 23rd, 2004 & Nov. 30th 2004.Dec.2,2004		
	12.b. Amount. \$165		
	12.b. Amount. \$165		
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money			
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bidg., Room No., if any			

14.b. Amount of payment.

13.b. Is the Business an Employer

ZIP Code + 4

or Consultant

?

Street

City

State

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8, Name and address of Business (including trade name, if any). 9. Business deals with: Name Alliance Bernstein a. Labor Organization Trade Name, if any: X b. Trust P.O. Box, Bldg., Room No., if any c. Employer Street 1345 Avenue of the Americas City New York State New York ZIP Code + 4 10105 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. Union is the Collective Bargaining Agent for the Name Road Carriers Local 707 Pension Fund participants in the Pension Fund. Vincent Cangelosi is a Trustee on the Pension Fund. Employer is an Trade Name, if any: Investment Manager hired by the Pension Fund. The Pension fund pays the Investment Manager a fee. P.O. Box, Bldg., Room No., if any Suite 301 Street 14 Front Street 11.b. Approximate dollar value of such dealing. \$72,000 City Hempstead 12.a. Nature of interest held or income received. Dinner meeting hosted by several Investment State New York ZIP Code + 4 11550 - 3602 Managers on 11-30-04. 12.b. Amount. \$30

or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or (including trade name, if any).	Labor Relations Consultant	14.a. Nature of payment.	
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State	ZiP Code + 4		
13.b. Is the Business an Employer	or Consultant ?	14.b. Amount of payment.	